

Trust Board Performance Overview Report – Month 5, August 2019

This report provides an update to the Trust Board on National and local performance indicators.

National Performance

(1) Single Oversight Framework (SOF): The NHS Improvement (NHSI) SOF was implemented on 1 October 2016. The framework follows themes which are linked to those of the Care Quality Commission (CQC). By focussing on these themes, NHSI will support providers to attain and/or maintain a CQC 'good' or 'outstanding' rating. In the majority of cases NHSI will be sourcing Trust performance data from publicly available sources e.g. CQC, NHS Digital, NHS England, and Unify. The majority of the indicators do not have targets/thresholds, so where information is available the published performance has been measured against the average position for England. There is a reporting time lag in some cases; where this is the case the **last** available reported position is reflected in this report.

Local Performance

Contractual Performance: the Trust is contracted by a number of commissioners to provide a range of services across the 4 clinical directorates below. This report provides a summary of performance against the performance indicators within each of the Trust's contracts.

- (2) All Ages Mental Health – Oxfordshire (includes BaNES, Swindon & Wiltshire (BSW))
- (3) All Ages Mental Health - Buckinghamshire
- (4) Community Services
- (5) Specialised Services

Summary of Indicators

In total, the Trust routinely reports information and performance relating to **2058 indicators**; broken down as follows.

Area	Indicators with defined targets					Indicators with no target	Totals
	Monthly	Quarterly	Yearly	Bi-Annual/Seasonal	Total		
National Performance							
(1) Single Oversight Framework	8	4	3	0	15	12	27
Local Contractual Performance							
(2) Community Services	42	60	26	10	138	767	905
(3) All Ages Mental Health Oxon and BSW	126	13	1	0	140	413	553
(4) All Ages Mental Health Buckinghamshire	46	16	1	3	66	266	332
(5) Specialised Services	123	11	0	4	140	101	241
Local Contractual Total	337	100	28	17	484	1547	2031
Grand Total	345	104	31	17	499	1559	2058

Performance Scorecard

The tables below show performance as at month 5, and then breakdown of performance is provided below;

Summary

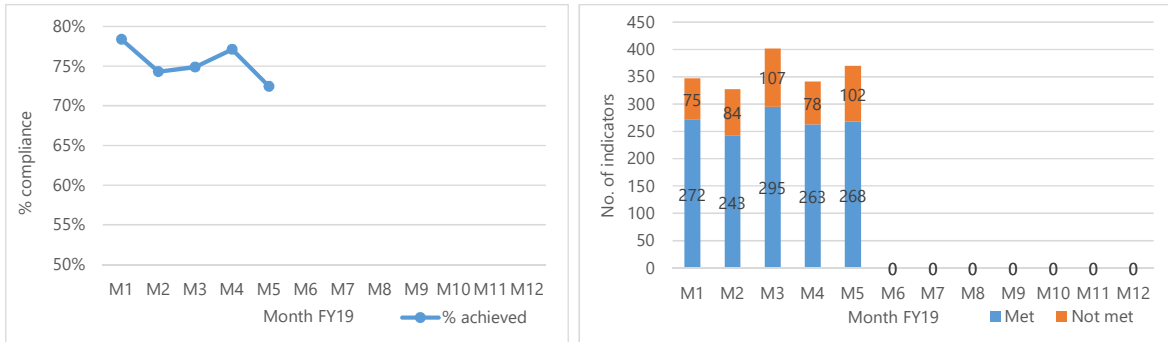
Directorate	Below target >10%	Below Target -1-9%	Target Met	No Target	Total	% Met
National Performance						
(1) Single Oversight Framework	0	1	7	12	8	88%
Local Contractual Performance						
(2) Community Services	9	6	60	767	75	80%
(3) All Ages Mental Health Oxon and BSW	28	19	79	413	126	63%
(4) All Ages Mental Health Buckinghamshire	9	8	29	266	46	63%
(5) Specialised Services	6	17	100	101	123	81%
Local Contractual Performance Total	52	50	268	1547	370	72%
Grand Total	52	51	275	1559	378	73%

Breakdown

Area	Below target	Below Target	Target Met	No Target	Total	% Met
National Performance						
(1) Single Oversight Framework	0	1	7	12	8	88%
Quality of Care	0	1	3	8	4	75%
Operational Performance	0	0	4	0	4	100%
Organisational Health	0	0	0	4	0	N/A
Local Contractual Performance						
(2) Community Services	9	6	60	767	75	80%
School Health Nursing and College Health Nursing services, Public Health Promotion Resources services and a National Child Measurement Programme	1	2	30	339	33	91%
Health Visiting and Family Nurse Partnership services	0	0	0	83	0	N/A
School Age Immunisations	0	0	4	3	4	100%
Oxon Community & Mental Health Contract (Adults Community services)	4	3	16	266	23	70%
Oxon Community & Mental Health Contract (Children Community services)	2	1	3	15	6	50%
Oxon Community & Mental Health Contract (Other)	0	0	5	0	5	100%
Podiatry	0	0	1	26	1	100%
Luther Street Medical Centre	0	0	0	0	0	N/A
Buckinghamshire Continuing Healthcare	2	0	1	35	3	33%
(3) All Ages Mental Health Oxon and BSW	28	19	79	413	126	63%
Adult Mental Health Outcomes Based Commissioning (OBC) Sch 4	6	3	2	3	11	18%
Adult Mental Health Outcomes Based Commissioning (OBC) Incentivised	3	0	9	87	12	75%
Child and Adolescent Mental Health Service (CAMHS)	2	0	4	75	6	67%
Child and Adolescent Mental Health Service (CAMHS) Incentivised	2	2	2	0	6	33%
Integrated Access to Psychological Therapies (IAPT) Wellbeing (Oxon)	2	2	6	9	10	60%
Wellbeing (Oxon)	0	0	13	0	13	100%
Oxfordshire Perinatal Mental Health Service	1	1	7	0	9	78%
Community & Mental Health Contract Sch 4 (Oxon)	1	1	8	7	10	80%
Child and Adolescent Mental Health Service (BSW)	11	7	15	134	33	45%
Adult Eating Disorders (Wiltshire)	0	3	5	45	8	63%
Oxon Joint Management Group (JMG)	0	0	8	53	8	100%
(4) All Ages Mental Health Buckinghamshire	9	8	29	266	46	63%
Adults & Older Adults Community Mental Health Teams and Inpatients, Integrated Access to Psychological Therapies and Psychiatric In Reach Liaison Service	4	6	16	35	26	62%
Child and Adolescent Mental Health Service (CAMHS)	1	1	3	173	5	60%
Child and Adolescent Mental Health Service (CAMHS) Incentivised	3	0	3	0	6	50%
Buckinghamshire Perinatal Mental Health Service	1	1	7	0	9	78%
(5) Specialised Services	6	17	100	101	123	81%
Learning Disabilities (OCCG)	3	2	4	4	9	44%
Dentistry (NHSE)	0	0	25	9	25	100%
Specialist Dentistry (NHSE)	0	0	0	0	0	N/A
Forensic Medium Secure Unit (NHSE)	3	4	16	22	23	70%
Forensic Low Secure Unit (NHSE)	0	6	17	22	23	74%
Child and Adolescent Mental Health Service (CAMHS) Tier 4 Inpatients	0	3	16	22	19	84%
Eating Disorders Inpatients (NHSE)	2	2	20	22	24	83%
Medium Secure Inpatient service (Evenlode)	0	0	0	0	0	N/A

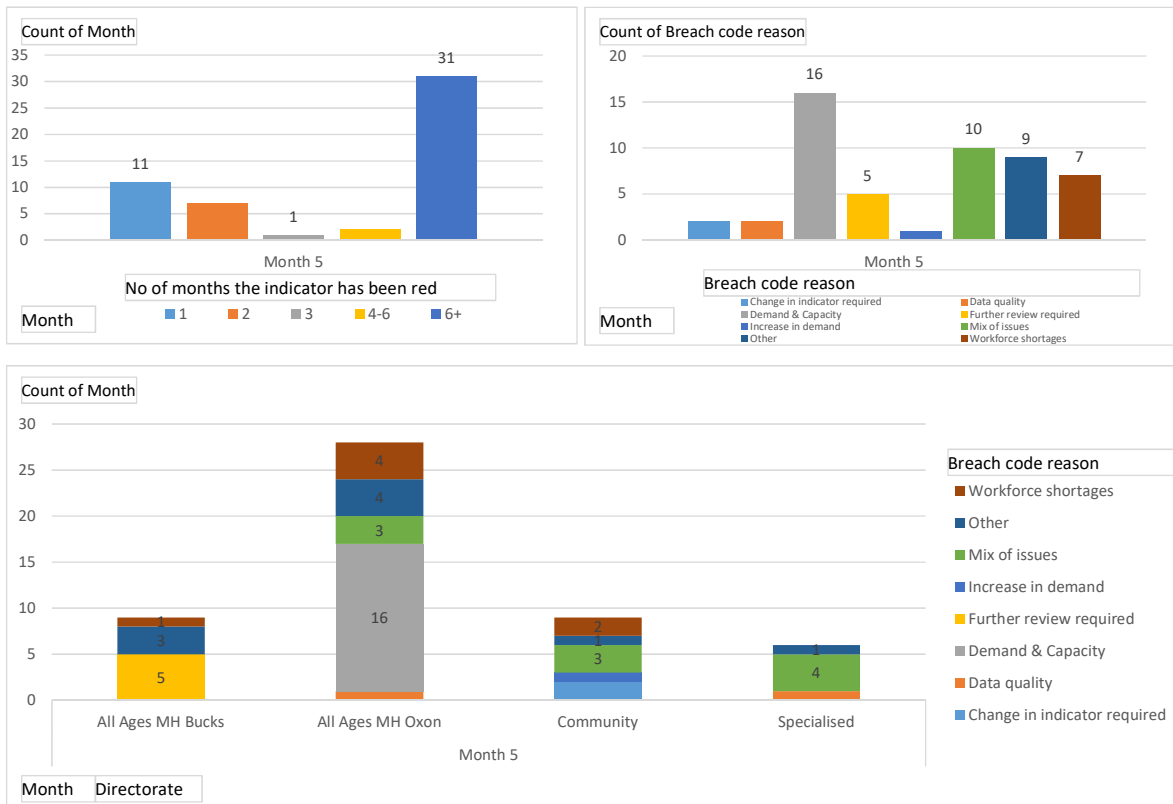
Performance Trend

The number of reportable indicators varies each month as while the majority are reportable monthly, some are reportable less frequently (such as quarterly or bi-annually). In month 5, 370 contractual indicators were reportable and of these 72% were achieved. This is a decrease of 5% compared to last month. The number of red indicators this month was 52 which represents 14% of the total number of indicators. Last month it was 17% based on 341 indicators.



In month 5, there were 31 red indicators that have been red for more than 6 months and 2 indicators red for 4 to 6 months. Last month the figures were 29 for 6 months plus and 4 indicators for 4 to 6 months.

In month 5, the main reason attributed to the non-achievement of local contractual indicators was "Demand & Capacity"; **16 of the 52 red** indicators were not achieved due to this. The graph at the bottom shows the breakdown of reasons by directorate.



Red Indicators (>=10% under target)

Directorate	Measure	Target	Reason	Likelihood	Risk Rating	Graph	Narrative
Contract/Service		Actual	Months below Target	Impact			
Local Performance: Contractual							
Specialised Services	% Cumulative Bed Occupancy	100%	Mix of Issues				<p>Description of the issue: The need to manage patients with high dependency and/or restraint nasogastric feeding has impact on the flow of admissions as the Service needs to ensure patient levels match staffing resource so that patient safety is maintained. In addition, a couple of beds were vacant due to patients being on the waiting list to be admitted, but weren't admitted after an assessment (patients refused to be admitted or re-scheduled dates for admission).</p> <p>Is there a plan to resolve: Yes</p> <p>What is the plan: The service has implemented a Single Point of Access (SPA) as part of the New Care Models and expect the bed status to improve as patient flow becomes established across the network. There is a monitoring mechanism in place. The Forensic Senior group also provide oversight.</p>
Adult Eating Disorders		79%	6+ months				
Specialised Services	% of routine referrals to Specialist Learning Disability Health Services meeting 6 week wait	95%	Mix of Issues	2	6		<p>Description of issue: 6 patients not seen within the timeframe, of which 4 can be exceptioned, which brings achievement to 89%.</p> <ul style="list-style-type: none"> • 1 due to patient choice as going on holiday – seen 8 weeks and 6 days • 1 Admin error – wait documented as 1 year and 8 months. Physio patient - staff member reminded to document waits correctly (actual wait not known) • 1 due to patient choice, requesting later appointment- seen 9 weeks and 6 days • 1 patient did not require an initial appointment and was placed on professional waiting list – seen 6 weeks and 2 days • 1 patient offered the first available appointment - seen 6 weeks and 2 days • 1 patient offered first available appointment – seen 7 weeks and 4 days <p>Is there a plan to resolve? Yes</p> <p>What is the plan: Data recording error to be rectified, and as part of our standard operating procedure we need to make sure that where an appointment is offered but declined due to patient/carer availability that we make a note on system and offer appointment at soonest availability.</p>
Learning Disability Services		67%	6+ months	3			
All Ages Mental Health Bucks	Local 20i -% people will have care review within the (timeframe) specified by the cluster package	95%	Further review required	3	9		<p>Description of the issue: Care reviews not being completed within the contracted timescales.</p> <p>Is there a plan to resolve? Yes</p> <p>What is the plan? Trustwide the new Mental Health dashboard will be available from September. In the mean-time the service has sourced and implemented a Caseload Monitoring Tool (Butler 2004) which will enable them to monitor activity more closely with teams and individuals and provide a reference point in supervision to review the care package and required review dates.</p>
Bucks CCG (Adults Working Age)		60%	6+ months	3			
All Ages Mental Health Bucks	Access – % of ROUTINE referrals assessed within 4 weeks - TOTAL for LIS (Local Incentive Scheme) Inc. Single Point of Access, Targeted, Getting More Help, Learning Disabilities & Outreach Service for Children and Adults.	90%	Further review required	3	9		<p>Description of the issue: This is the total referral to access measure which is incentivised with an average quarterly target of 90% from Quarter 3, but starting with 90% for September. If we take out the patient choice element the figures would be 101/125 which is 81% performance.</p> <p>Is there a plan to resolve? Yes</p> <p>What is the plan? The service is requesting a change to the measure with commissioners, currently it is "The count of routine referrals seen within 4 weeks" the service is proposing that the measure should be "The count of routine referrals offered within 4 weeks" as patient choice is not within our control. They will also be conducting a deep dive around all August breaches to ensure they have a robust process for reporting and recording for the new rules for this incentivised measure.</p>
Bucks CAMHS (Child & Adolescent Mental Health Service)		65%	6+ months	3			

All Ages Mental Health Bucks	Access: % of ROUTINE referrals assessed within 4 weeks – Targeted Pathway – Getting More Help	90%	Further review required	3	9		<p>Description of the issue: 29 breaches in total: 15 were patient choice and the remaining 14 had various reasons around processes that the Service is investigating. If we take out the patient choice element the figures would be 57 seen within the timeframe out of 71 which is 80% performance against target.</p> <p>Is there a plan to resolve? Yes</p> <p>What is the plan? The service will be conducting a deep dive around all August breaches to ensure they have a robust process for reporting and recording for the new rules for this incentivised measure.</p>
Bucks CAMHS (Child & Adolescent Mental Health Service)		59%	6+ months	3			
Community Services	Referrals completed within 28 days	80%	Workforce shortages	3	6		<p>Description of the issue: Sixteen assessments were completed outside of the timeframe due to a variety of reasons - workforce shortages and resources required for twelve complex cases requiring twice a week caseload management, safeguarding and one to one support.</p> <p>Is there a plan to resolve: Partly</p> <p>What is the plan: Continue monitoring Service improvement action plan through the monthly Monitoring meeting with Buckinghamshire Clinical Commissioning Group; on-going recruitment and attending Job fair in September 2019</p>
Continuing health care (Bucks)		64%	6+ months	2			
Community Services	Eligibility decisions are made within 28 days of accepting a referral.	95%	Mix of issues	3	6		<p>Description of the issue: Some factors contributing towards the breach of this indicator are outside of Trust's control (such as referrals from the acute setting, delays from social care etc.). Increase in legacy work caused by increase in referrals in July combined with workforce shortages due to intermittent sickness contributed towards the underperformance against this indicator in August.</p> <p>Is there a plan to resolve: Yes</p> <p>What is the plan: Oxfordshire Clinical Commissioning Group (OCCG) recognised that performance against this indicator is affected by factors outside of Trust's control and will be arranging a Task & Finish group with all key stakeholders to address a variety of issues and support achievement of all key contractual performance indicators. The Service continues working closely with the acute sector and the local authority. In addition to that, the Service is now discussing the Situation Report on a daily basis.</p>
Continuing health care (Oxon)		45%	6+ months	2			
Community Services	Individuals eligible for Continuing Healthcare will receive a case review which will include care plan review 3 months after eligibility decision	95%	Mix of issues	3	6		<p>Description of the issue: Eight people have not had a three month review due to initial eligibility assessments taking priority, especially if the referrals are from the acute or community hospitals as this supports bed capacity within the system. The backlog of reviews has been cleared, however, increasing referral rate will have an impact on timely reviews as more people become eligible and subsequently the amount of reviews increases.</p> <p>Is there a plan to resolve: Partly</p> <p>What is the plan: Each locality has a dedicated member of staff focusing on reviews for a month to prevent deterioration in delays and backlog.</p>
Continuing health care (Oxon)		62%	6+ months	2			
Community Services	Individuals eligible for Continuing healthcare will receive a case review which will include care plan review every 12 months	95%	Mix of issues	3	6		<p>Description of the issue: Twenty people have not had a three month review due to initial eligibility assessments taking priority, especially if the referrals are from the acute or community hospitals as this supports bed capacity within the system. The backlog of reviews has been cleared, however, increasing referral rate will have an impact on timely reviews as more people become eligible and subsequently the amount of reviews increases.</p> <p>Is there a plan to resolve: Partly</p> <p>What is the plan: Each locality has a dedicated member of staff focusing on reviews for a month to prevent deterioration in delays and backlog.</p>
Continuing health care (Oxon)		31%	6+ months	2			

Community Services	Every child over five years of age will receive a review health assessment annually	90%	Other	3	6		<p>Description of the issue: Nine children placed outside of Oxfordshire were not seen within the timeframe due to a mix of issues outside the Trust's control. The Looked After Children teams in another counties offered appointments outside of the timeframe or reported limited capacity to conduct health assessments. Also young people refused to have the health assessment or did not attend the scheduled appointment.</p> <p>Is there a plan to resolve: No as outside of Trust's control</p> <p>What is the plan: N/A</p>
Looked After Children (out of county)		10%	6+ months	2			
Community Services	Percentage of all under 25 year olds screened for chlamydia (supported by offering chlamydia screening to 100% attendees on an opt out basis)	85%	Change in indicator required	3	6		<p>Description of the issue: Not all appointments that included reference to sexual health were appropriate to offer screening</p> <p>Is there a plan to resolve: Yes</p> <p>What is the plan: Working with commissioners for a more meaningful indicator and/or way of counting</p>
College Health Nursing		39%	6+ months	2			
All Ages Mental Health Oxon	Clinic letters sent to General Practitioners (GPs) within 7 calendar days	95%	Workforce shortages	4	12		<p>Description of the issue: The breaches are primarily due to a lack of administrative capacity.</p> <p>Is there a plan to resolve: Yes</p> <p>What is the plan: Currently advertising and actively recruiting to fill staff vacancies. All teams, particularly those with multiple breaches, have been reminded to complete and send letters within 5 days. The Performance and Information team are working with the service to redesign process for reporting to enable better exception reporting of breaches, we hope this will be in place in for september WD10 submissions.</p>
Oxon CAMHS (Child & Adolescent Mental Health Service)		61%	6+ months	3			
All Ages Mental Health Oxon	Percentage of children/young person having their first routine appointment within 12 weeks of referral	75%	Demand & Capacity	4	12		<p>Description of the issue: Access rates and referrals into the service is increasing, which is also reflected at a national level. Funding to manage the increasing demand is focusing on those waiting longer than 12 weeks (92 assessments / 71%), which does not positively impact on this Key Performance Indicator.</p> <p>Is there a plan to resolve: Yes</p> <p>What is the plan: Healios have been contracted by the Trust, to reduce the waiting list. Oxfordshire CCG are regularly updated of progress. Furthermore, a single point of access was implemented to improve access and patient flow, with the aim of reducing administrative processes and waiting times.</p>
Oxon CAMHS Incentivized (£££)		33%	6+ months	3			
All Ages Mental Health Oxon	Percentage of children that receive a diagnosis or treatment within 12 weeks of routine referral into NDC (Neurodevelopment)	75%	Workforce shortages	4	12		<p>Description of the issue: There is a reduction in paediatric input impacting on number of assessments able to be completed. There is a large backlog of long waiters that are a priority, due to length of time of they have been waiting.</p> <p>Is there a plan to resolve: Yes</p> <p>What is the plan: Currently advertising and actively recruiting to fill staff vacancies.</p>
Oxon CAMHS Incentivized (£££)		6%	6+ months	3			

All Ages Mental Health Oxon	LAC will be seen within 2 weeks for all CAMHS services excluding the neurodevelopment pathway	95%	Mix of issues	4	12		<p>Description of the issue: Current social care system integration does not support achievement of this indicator, due to delays caused by external factors outside of Trust's control. Administrative processes are not as efficient as they could be and are the cause of some breaches</p> <p>Is there a plan to resolve? Yes</p> <p>What is the plan? Oxfordshire Clinical Commissioning Group have been made aware and discussions are underway to look to resolve the issues faced with the current social care system. A new administrative system has been put in place, to minimise the breaches attributable to the Oxford Health Foundation Trust Looked After Children (LAC) team.</p>
Oxon CAMHS (Child & Adolescent Mental Health Service)		63%	6+ months	3			
All Ages Mental Health Oxon	Referral to treatment time Community CAMHS (Excluding Eating Disorders) - No. Within 8 Weeks	75%	Demand & Capacity	4	8		<p>Description of the issue: Demand and Capacity</p> <p>Is there a plan to resolve: Yes</p> <p>What is the plan: A comprehensive waiting time improvement plan has been put in place by the service and shared with the commissioners (from April 2019). Implementation is being overseen by a new Outcomes Performance and Improvement Group chaired by the Head of Service. Regular updates on performance are provided to commissioners at bi-monthly Contract Review Meetings. The plan is beginning to have a positive impact on waits with improvements in July-August. We are having regular discussions with commissioners regarding demand and capacity through Contract Review Meetings (CRM) meetings. Oxford Health are also utilising Healios, a specialist online provider of mental health and neuro-developmental services, to help manage demand.</p>
BANES CAMHS (Child & Adolescent Mental Health Service)		24%	6+ months	2			
All Ages Mental Health Oxon	Percentage of Children and Young People (CYP) having their first appointment (Excluding Eating Disorders) - % within 4 weeks	85%	Demand & Capacity	4	8		<p>Description of the issue: Demand and Capacity</p> <p>Is there a plan to resolve: Yes</p> <p>What is the plan: A comprehensive waiting time improvement plan has been put in place by the service and shared with the commissioners (from April 2019). Implementation is being overseen by a new Outcomes Performance and Improvement Group chaired by the Head of Service. Regular updates on performance are provided to commissioners at bi-monthly Contract Review Meetings. The plan is beginning to have a positive impact on waits with improvements in July-August. We are having regular discussions with commissioners regarding demand and capacity through CRM meetings. Oxford Health are also utilising Healios, a specialist online provider of mental health and neuro-developmental services, to help manage demand.</p>
BANES CAMHS (Child & Adolescent Mental Health Service)		32%	6+ months	2			
All Ages Mental Health Oxon	Percentage of Children and Young People (CYP) having their first appointment (Excluding Eating Disorders) - % within 8 weeks	95%	Demand & Capacity	4	8		<p>Description of the issue: Demand and Capacity</p> <p>Is there a plan to resolve: Yes</p> <p>What is the plan: A comprehensive waiting time improvement plan has been put in place by the service and shared with the commissioners (from April 2019). Implementation is being overseen by a new Outcomes Performance and Improvement Group chaired by the Head of Service. Regular updates on performance are provided to commissioners at bi-monthly Contract Review Meetings. The plan is beginning to have a positive impact on waits with improvements in July-August. We are having regular discussions with commissioners regarding demand and capacity through CRM meetings. Oxford Health are also utilising Healios, a specialist online provider of mental health and neuro-developmental services, to help manage demand.</p>
BANES CAMHS (Child & Adolescent Mental Health Service)		68%	6+ months	2			
All Ages Mental Health Oxon	Referral to treatment time Community CAMHS (Excluding Eating Disorders) - No. Within 8 Weeks	50%	Demand & Capacity	4	8		<p>Description of the issue: Demand and Capacity</p> <p>Is there a plan to resolve: Yes</p> <p>What is the plan: A comprehensive waiting time improvement plan has been put in place by the service and shared with the commissioners (from April 2019). Implementation is being overseen by a new Outcomes Performance and Improvement Group chaired by the Head of Service. Regular updates on performance are provided to commissioners at bi-monthly Contract Review Meetings. The plan is beginning to have a positive impact on waits with improvements in July-August. We are having regular discussions with commissioners regarding demand and capacity through CRM meetings. Oxford Health are also utilising Healios, a specialist online provider of mental health and neuro-developmental services, to help manage demand.</p>
Swindon CAMHS (Child & Adolescent Mental Health Service)		18%	6+ months	2			

All Ages Mental Health Oxon	Percentage of Children and Young People (CYP) having their first appointment (Excluding Eating Disorders) - % within 4 weeks	45%	Demand & Capacity	4	8		<p>Description of the issue: Demand and Capacity</p> <p>Is there a plan to resolve: Yes</p> <p>What is the plan: A comprehensive waiting time improvement plan has been put in place by the service and shared with the commissioners (from April 2019). Implementation is being overseen by a new Outcomes Performance and Improvement Group chaired by the Head of Service. Regular updates on performance are provided to commissioners at bi-monthly Contract Review Meetings. The plan is beginning to have a positive impact on waits with improvements in July-August. We are having regular discussions with commissioners regarding demand and capacity through CRM meetings. Oxford Health are also utilising Healios, a specialist online provider of mental health and neuro-developmental services, to help manage demand.</p>
Swindon CAMHS (Child & Adolescent Mental Health Service)		13%	6+ months	2			
All Ages Mental Health Oxon	Referral to treatment time Community CAMHS (Excluding Eating Disorders) - No. Within 8 Weeks	70%	Demand & Capacity	4	8		<p>Description of the issue: Demand and Capacity</p> <p>Is there a plan to resolve: Yes</p> <p>What is the plan: A comprehensive waiting time improvement plan has been put in place by the service and shared with the commissioners (from April 2019). Implementation is being overseen by a new Outcomes Performance and Improvement Group chaired by the Head of Service. Regular updates on performance are provided to commissioners at bi-monthly Contract Review Meetings. The plan is beginning to have a positive impact on waits with improvements in July-August. We are having regular discussions with commissioners regarding demand and capacity through CRM meetings. Oxford Health are also utilising Healios, a specialist online provider of mental health and neuro-developmental services, to help manage demand.</p>
Wiltshire CAMHS (Child & Adolescent Mental Health Service)		33%	6+ months	2			
All Ages Mental Health Oxon	Percentage of Children and Young People (CYP) having their first appointment (Excluding Eating Disorders) - % within 4 weeks	75%	Demand & Capacity	4	8		<p>Description of the issue: Demand and Capacity</p> <p>Is there a plan to resolve: Yes</p> <p>What is the plan: A comprehensive waiting time improvement plan has been put in place by the service and shared with the commissioners (from April 2019). Implementation is being overseen by a new Outcomes Performance and Improvement Group chaired by the Head of Service. Regular updates on performance are provided to commissioners at bi-monthly Contract Review Meetings. The plan is beginning to have a positive impact on waits with improvements in July-August. We are having regular discussions with commissioners regarding demand and capacity through CRM meetings. Oxford Health are also utilising Healios, a specialist online provider of mental health and neuro-developmental services, to help manage demand.</p>
Wiltshire CAMHS (Child & Adolescent Mental Health Service)		27%	6+ months	2			
All Ages Mental Health Oxon	Percentage of Children and Young People (CYP) having their first appointment (Excluding Eating Disorders) - % within 8 weeks	85%	Demand & Capacity	4	8		<p>Description of the issue: Demand and Capacity</p> <p>Is there a plan to resolve: Yes</p> <p>What is the plan: A comprehensive waiting time improvement plan has been put in place by the service and shared with the commissioners (from April 2019). Implementation is being overseen by a new Outcomes Performance and Improvement Group chaired by the Head of Service. Regular updates on performance are provided to commissioners at bi-monthly Contract Review Meetings. The plan is beginning to have a positive impact on waits with improvements in July-August. We are having regular discussions with commissioners regarding demand and capacity through CRM meetings. Oxford Health are also utilising Healios, a specialist online provider of mental health and neuro-developmental services, to help manage demand.</p>
Wiltshire CAMHS (Child & Adolescent Mental Health Service)		62%	6+ months	2			
All Ages Mental Health Oxon	Percentage of people that have a Care plan review in the last 12 months (of people opened for 12 months or longer)	85%	Demand & Capacity	4	8		<p>Description of the issue: Demand and Capacity</p> <p>Is there a plan to resolve: Yes</p> <p>What is the plan: New MH Dashboard is being created by IM&T for the AMHT which will flag up patients due to CPA review in the next and this will allow teams to plan demand and resources better. Dashboard training happening across the trust in September. Dashboards to go live in October</p>
OBC (Outcomes Based Contract) Sch 4		70%	6+ months	2			

All Ages Mental Health Oxon	Percentage of outpatient letters that are sent back to GPs (uploaded to CareNotes) within 7 calendar days	95%	Demand & Capacity	4	8		Description of the issue: Demand and Capacity Is there a plan to resolve: Yes What is the plan: The Trust continues to improve efficiency and productivity wherever possible but additional investment is required. Staff are being reminded about the letter on a regular basis. The Trust is working with commissioners to secure the additional investment required in mental health services
OBC (Outcomes Based Contract) Sch 4		73%	6+ months	2			
All Ages Mental Health Oxon	Adult Community Mental Health Team - Percentage of referrals categorised as urgent that are assessed within 7 calendar days	95%	Demand & Capacity	3	9		Description of the issue: Demand and Capacity Is there a plan to resolve: Yes What is the plan: The Trust continues to improve efficiency and productivity wherever possible but additional investment is required. Referrals continue to be dealt with, as efficiently and effectively as possible. The Trust is working with commissioners to secure the additional investment required in mental health services
OBC (Outcomes Based Contract) Sch 4		84%	6+ months	3			
All Ages Mental Health Oxon	Adult Community Mental Health Team - Percentage of referrals categorised as non-urgent that are assessed within 28 calendar days	90%	Demand & Capacity	4	8		Description of the issue: Demand and Capacity Is there a plan to resolve: Yes What is the plan: The Trust continues to improve efficiency and productivity wherever possible but additional investment is required. Referrals continue to be dealt with as efficiently and effectively as possible. The Trust is working with commissioners to secure the additional investment required in mental health services.
OBC (Outcomes Based Contract) Sch 4		52%	6+ months	2			
All Ages Mental Health Oxon	Percentage of service users who have had a comprehensive physical health assessment covering Body Mass Index, blood pressure, smoking status, blood sugar levels, alcohol intake and exercise levels in the previous 12 months (electronic caseload reporting)	85%	Data Quality	4	8		Description of the issue: The correct data for this particular key performance indicator is not being pulled through and is leading to duplication Is there a plan to resolve: Yes What is the plan: Trust's Performance & Information (P&I) Team have now Assigned resource to this project to look into the SQL coding for the reports. This project is on the Technical Information Group (TIG) action log and updates will be provided on a regular basis by the P&I team at future TIG Meetings. It is anticipated that this work will take a few months due to capacity issues.
OBC (Outcomes Based Contract) Sch 4		55%	6+ months	2			
All Ages Mental Health Oxon	% of service users in clusters 4-17 under the care of OHFT with a reduction in intensity in HoNOS rating score at their most recent cluster review*	30%	Other	3	6		Description of the issue: Oxford Health Foundation Trust continue to provide an excellent standard of care. Despite this, fluctuations in patients' conditions can occur and are closely monitored Is there a plan to resolve: Yes What is the plan: The service continues to monitor the situation and respond with appropriate care, if patient's conditions deteriorate
OBC (Outcomes Based Contract) Incentivised (£££)		27%	6+ months	2			

All Ages Mental Health Oxon	The length of wait for the 75th centile at Step/Cluster 3 for Cognitive Behavioural Therapy (CBT)	8 weeks	Mix of issues	3	9		Description of the issue: Accommodation Issues and capacity Is there a plan to resolve: Yes What is the plan: Now funding has been agreed Financial Year of 2019/20 we have commenced recruitment to posts, we hope to have staff in post by September/October. There are also continued clinical accommodation pressures in the North East, Vale and West
Integrated Access to Psychological Therapies (IAPT)		13 weeks	6+ months	3			
All Ages Mental Health Oxon	All patients referred to EDPS are seen within the agreed timeframe - Horton General Hospital (90 Minutes)	95%	Workforce shortages	2	8		Description of the issue: It is not possible for the Service to achieve the target set by commissioners with the current investment at this time. The Trust would need additional funding to recruit staff to provide additional cover during night shifts and weekends, which is when the majority of breaches occur. Is there a plan to resolve: Yes What is the plan: Oxford Health Foundation Trust continue to monitor the situation and work with commissioners to secure the additional investment required in mental health services.
Emergency Department Psychiatric Service (EDPS)		83%	6+ months	4			
Specialised Services	% of staff who have received statutory/mandatory training	90%	Other	3	9		Description of the issue: Training Capacity/availability Issues PPST - Fire Response - only date available is the 22nd Nov, with all of the remainder courses listed until 2020, full. - ILS full day training - no availability until March 2020, waiting list availability only (which is difficult for ward staff to do, as they cannot just attend a full days training at short notice; this needs to be planned onto the rota in advance). CCCS - CRAM Training is not available at all, unless it is part of Corporate Induction. - Mental Capacity Act and Mental Health Act Refresher – not available at present as fully booked until the end of 2019. No courses are currently listed for 2020 to book. Is there a plan to resolve: Yes What is the plan: The service is in continual contact with L&D, and await further communications
Adult Eating Disorders		79%	5 months	3			
All Ages Mental Health Bucks	Access: % of ROUTINE referrals assessed within 4 weeks – Eating Disorders	95%	Other	3	9		Description of the issue: 1 breach which was a cancellation by the patient, they were seen within 34 days. Is there a plan to resolve? No as there was no risk to the patient at any point. What is the plan: N/A
Bucks CAMHS (Child & Adolescent Mental Health Service)		67%	5 months	3			
All Ages Mental Health Oxon	Routine referrals to be assessed within 14 days	95%	Workforce shortages	3	6		Description of the issue: The Perinatal service is a relatively new service starting in April 2019. This month's underperformance was due to staff sickness, annual leave and no medical cover available, this reduced the service's capacity to manage the referrals within the timeframe. However, all referrals were seen within 3 weeks, unless they were cancelled or did not attend, by the patients. Is there a plan to resolve: Yes What is the plan: The service has secured funding for two full-time staff due to increased demand. The service will continue to monitor fluctuations in demand and pre-empt future reductions in capacity, by organising medical cover that can be employed during these periods.
Perinatal Service		50%	3 months	2			

Specialised Services	Discharges: % of Service Users receiving accessible discharge summary within 10 days of discharge	95%	Mix of Issues	2	4		<p>Description of the issue: 6 letters not sent to user within timeframe. Of the 6 letters identified as not sent to patients with in time frame,</p> <ul style="list-style-type: none"> • 5 have been resolved (now sent in accessible format) • 1 was a recording issue in that it should have been recorded as an exception due to the fact that the easy read version was inaccessible at the time of sending. This has now been rectified <p>Is there a plan to resolve: Yes</p> <p>What is the plan: KPI info to be shared with all team members so that they have a broader understanding of what needs to be completed to provide assurance re quality of care, and attainment against the KPI.</p>
Learning Disability Services		71%	2 months	2			
Specialised Services	% of GP discharge templates issued within 10 days of patient discharge	95%	Mix of Issues	3	9		<p>Description of the issue: Further investigation of the 6 breaches showed that</p> <ul style="list-style-type: none"> • 1 patient was not eligible for referral • 1 patient was an inappropriate referral and signposted to ASC • 1 patient not appropriate for Tier3/4 care • 3 genuine breaches <p>Is there a plan to resolve? Yes</p> <p>What is the plan: Staff reminded of the criteria for inclusion. KPI info to be shared with all team members so that they have a broader understanding of what needs to be completed to provide assurance re quality of care.</p>
Learning Disability Services		77%	2 months	3			
All Ages Mental Health Bucks	PR04ii - Urgent referrals to Mental Health Team will be seen within 7 consecutive days for assessment.	95%	Other	3	9		<p>Description of the issue:</p> <p>North Bucks – 89% (16/18) 2 patients breached, 1 was a patient Did Not Attend and the other was patient was triaged and offered an appointment within the timeframe but chose at later date, both have now been assessed.</p> <p>South Bucks – 67% (4/6) Both were patient choice and have now been seen, one is already engaged in psychotherapy and the other has a referral to psychology.</p> <p>Is there a plan to resolve? No as all patient choice so outside of the control of the service.</p> <p>What is the plan: N/A</p>
Bucks CCG (Adults Working Age)		83%	2 months	3			
All Ages Mental Health Bucks	Memory Service Users with Diagnosis (F00, F01, F02, F03 and F06.7) will receive an assessment and diagnosis within 40 days of receipt of referral.	85%	Workforce shortages	4	12		<p>Description of the issue:</p> <p>North Bucks – 94% (15/16) South Bucks – 63% (22/35)</p> <p>There were 13 breaches for the south all due to first available appointments outside the 40 days timeframe.</p> <p>Is there a plan to resolve? Yes.</p> <p>What is the plan? The Dementia Specialist is now in post who will be working across North and South Bucks. Focus full time will be on South Team in to improve performance.</p>
Bucks CCG (Older People's Mental Health)		73%	2 months	3			
All Ages Mental Health Bucks	Local 20i -% people will have care review within the (timeframe) specified by the cluster package	95%	Further review required	3	9		<p>Description of the issue: Care reviews not being completed within the contracted timescales.</p> <p>Is there a plan to resolve? Yes</p> <p>What is the plan?</p> <p>Trustwide the new MH dashboard will be available from September. In the mean-time the service has sourced and implemented a Caseload Monitoring Tool (Butler 2004) which will enable them to monitor activity more closely with teams and individuals and provide a reference point in supervision to review the care package and required review dates.</p>
Bucks CCG (Older People's Mental Health)		78%	2 months	3			

All Ages Mental Health Bucks	Access: % of ROUTINE referrals assessed within 4 weeks – Targeted Pathway – Getting Help	90%	Further review required	3	9		<p>Description of the issue: 15 breaches, 5 were patient choice for appointment dates and the remaining 10 had various reasons around processes that we are investigating. If we take out the patient choice element the figures would be 29/39 which is 74%</p> <p>Is there a plan to resolve? Yes</p> <p>What is the plan? The service will be conducting a deep dive around all August breaches to ensure they have a robust process for reporting and recording for the new rules for this incentivised measure.</p>
Bucks CAMHS (Child & Adolescent Mental Health Service)		62%	2 months	3			
All Ages Mental Health Oxon	The length of wait for the 75th centile at Step/Cluster 3 for counselling	8 weeks	Mix of issues	3	9		<p>Description of the issue: Accommodation Issues and capacity</p> <p>Is there a plan to resolve? Yes</p> <p>What is the plan: Now funding has been agreed Financial Year of 2019/20 we have commenced recruitment to posts, we hope to have staff in post by September/October. There are also continued clinical accommodation pressures in the North East, Vale and West</p>
Integrated Access to Psychological Therapies (IAPT)		10 weeks	2 months	3			
All Ages Mental Health Oxon	Percentage of CYP Eating Disorder ONLY having their first appointment	95%	Other				<p>This indicator has breached its target by 10% or more for one month. Further investigation will be carried out if this indicator remains red next month (two months in a row).</p>
BANES CAMHS (Child & Adolescent Mental Health Service)		67%	1 month				
All Ages Mental Health Oxon	Percentage of Children and Young People (CYP) having their first appointment (Excluding Eating Disorders) - % within 8 weeks	65%	Demand & Capacity				<p>This indicator has breached its target by 10% or more for one month. Further investigation will be carried out if this indicator remains red next month (two months in a row).</p>
Swindon CAMHS (Child & Adolescent Mental Health Service)		33%	1 month				
All Ages Mental Health Oxon	Percentage of CYP Eating Disorder ONLY having their first appointment	95%	Other				<p>This indicator has breached its target by 10% or more for one month. Further investigation will be carried out if this indicator remains red next month (two months in a row).</p>
Wiltshire CAMHS (Child & Adolescent Mental Health Service)		80%	1 month				

All Ages Mental Health Oxon	Adult Community Mental Health Team - Percentage of referrals categorised as crisis/emergency that are assessed within 4 hours	95%	Demand & Capacity		This indicator has breached its target by 10% or more for one month. Further investigation will be carried out if this indicator remains red next month (two months in a row).
OBC (Outcomes Based Contract) Sch 4		83%	1 month		
All Ages Mental Health Oxon	Percentage of all referrals to adult mental health teams that are categorised as crisis/emergency where the patient (and carer where applicable) and the referring GP are contacted within 2 hours	95%	Demand & Capacity		This indicator has breached its target by 10% or more for one month. Further investigation will be carried out if this indicator remains red next month (two months in a row).
OBC (Outcomes Based Contract) Incentivised (£££)		56%	1 month		
All Ages Mental Health Oxon	% aggregated improvement in score on validated recovery evaluation tool amongst service users in clusters 4-17 at most recent cluster review - Recovery Star	55%	Other		This indicator has breached its target by 10% or more for one month. Further investigation will be carried out if this indicator remains red next month (two months in a row).
OBC (Outcomes Based Contract) Incentivised (£££)		40%	1 month		
Community Services	% of patients who are classified as "urgent swallow" to be offered assessment within two working days of referral received	95%	Increase in demand		This indicator has breached its target by 10% or more for one month. Further investigation will be carried out if this indicator remains red next month (two months in a row).
Speech & Language Therapy		81%	1 month		
Community Services	Percentage of Children notified by Local Authority to the Looked After Children team as new to care to be offered a health assessment within 20 working days	100%	Workforce shortages		This indicator has breached its target by 10% or more for one month. Further investigation will be carried out if this indicator remains red next month (two months in a row).
Looked After Children		83%	1 month		

Community Services	Decision Support Tool (DST) completed in acute hospital	15%	Change in delivery model required			This indicator has breached its target by 10% or more for one month. Further investigation will be carried out if this indicator remains red next month (two months in a row).
Continuing health care (Bucks)		25%	1 month			
All Ages Mental Health Bucks	Referral to treatment target of 6 weeks for psychological interventions	85%	Other			This is a new indicator reported for the first time. Further investigation will be carried out if this indicator remains red next month (two months in a row).
Bucks CCG (Adults Working Age)		33%	1 month			
Specialised Services	% of eligible staff who have received clinical supervision as per Trust/organisation policy	85%	Data Quality			This indicator has breached its target by 10% or more for one month. Further investigation will be carried out if this indicator remains red next month (two months in a row).
Forensic Services MSU		74%	1 month			

Risk Rating Key:

		Likelihood				
		1	2	3	4	5
		Rare	Unlikely	Possible	Likely	Almost certain
Impact	5 Catastrophic	5	10	15	20	25
	4 Major	4	8	12	16	20
	3 Moderate	3	6	9	12	15
	2 Minor	2	4	6	8	10
	1 Negligible	1	2	3	4	5

Out of Area Placements (OAP) during August 2019

There were 4 patients in Acute or PICU Out of Area placements during August 2019, utilising a total of 40 bed days in the month of August 2019: 2 patients were admitted to an OAP placement in August and 2 patients were admitted in July 2019 and were still out during August. All placements were attributed to bed availability.

2 Placements were in PICU beds, and 2 in Acute mental health beds.

3 Patients were Oxfordshire Clinical Commissioning Group patients and 1 was a Buckinghamshire Clinical Commissioning Group patient.

1 Patient was male and 3 were female.

The distance from patients' home to placements ranged from 71 to 244 miles, with the average distance being 150 miles.

CCG	Service	OAP admission month	Gender	NHS or Independent	Bed type	Reason for OAP admission	No. of OAP nights in Aug19	Distance (miles)
Oxon	Adults	Jul-19	F	Independent	Acute	Unavailability of bed	1	71.1
Oxon	Adults	Jul-19	F	Independent	PICU	Unavailability of bed	14	181
Oxon	Adults	Aug-19	F	Independent	PICU	Unavailability of bed	18	103
Bucks	Adults	Aug-19	M	Independent	Acute	Unavailability of bed	7	244